



CERTIFICATE OF PROPERTY INSURANCE

MFAJARDO

DATE (MM/DD/YYYY)
12/26/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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|---|---|--------------------------------------|--------|
| PRODUCER Socher Insurance Agency, Inc. 1350 Old Bayshore Highway #630 Burlingame, CA 94010 | CONTACT NAME: | | |
| | PHONE (A/C, No, Ext): (877) 317-9300 | FAX (A/C, No): (877) 317-9305 | |
| | E-MAIL ADDRESS: info@hoainsurance.net | | |
| | PRODUCER CUSTOMER ID: FIELOWN-01 | | |
| INSURED Fieldstone Owners Association Board of Directors 344 Fieldstone Drive Murphys, CA 95247 | INSURER(S) AFFORDING COVERAGE | | NAIC # |
| | INSURER A : Travelers Prop & Casualty Co | | |
| | INSURER B : Philadelphia Indemnity Insurance Company | | |
| | INSURER C : | | |
| | INSURER D : | | |
| | INSURER E : | | |
| | INSURER F : | | |

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Please see Certificate of Liability, Acord 25, for remaining coverage. Crime/Employee Dishonesty/Fidelity Bond includes Property Manager as an Employee.

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YYYY) | POLICY EXPIRATION DATE (MM/DD/YYYY) | COVERED PROPERTY | LIMITS | |
|--------------------------|---|---------------------|------------------------------------|-------------------------------------|------------------|---|-------------------|
| A | <input checked="" type="checkbox"/> PROPERTY | 680-6904R761 | 11/02/2018 | 11/02/2019 | BUILDING | \$ | |
| | CAUSES OF LOSS | | | | DEDUCTIBLES | PERSONAL PROPERTY | \$ |
| | | | | | BUILDING | BUSINESS INCOME | \$ |
| | <input type="checkbox"/> BASIC | | | | 5,000 | EXTRA EXPENSE | \$ |
| | <input type="checkbox"/> BROAD | | | | CONTENTS | RENTAL VALUE | \$ |
| | <input checked="" type="checkbox"/> SPECIAL | | | | | BLANKET BUILDING | \$ |
| | <input type="checkbox"/> EARTHQUAKE | | | | | BLANKET PERS PROP | \$ |
| | <input type="checkbox"/> WIND | | | | | <input checked="" type="checkbox"/> BLANKET BLDG & PP | 17,316,944 |
| | <input type="checkbox"/> FLOOD | | | | | <input checked="" type="checkbox"/> Bldg Ord Cov A: | \$ |
| | <input checked="" type="checkbox"/> Bid Ord A | | | | | <input checked="" type="checkbox"/> Bldg Ord Cov B&C: | 701,790 |
| <input type="checkbox"/> | INLAND MARINE | TYPE OF POLICY | | | \$ | | |
| <input type="checkbox"/> | CAUSES OF LOSS | | | | \$ | | |
| <input type="checkbox"/> | NAMED PERILS | POLICY NUMBER | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| B | <input checked="" type="checkbox"/> CRIME | PHSD1379480 | 11/02/2018 | 11/02/2019 | Limit: | 539,330 | |
| | TYPE OF POLICY | | | | Deductible: | 2,500 | |
| <input type="checkbox"/> | BOILER & MACHINERY / EQUIPMENT BREAKDOWN | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Special Form (wind included), 100% Replacement Cost Basis with No Co-Agreement requires it. Severability of Interest included on Package Policy. Insurance. 46 Units. Policy is Walls In if your Condominium Association

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| CERTIFICATE HOLDER For Informational Purposes Only | CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| | AUTHORIZED REPRESENTATIVE <i>Maria Fajardo</i> |